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STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

S.D. SEC. of STATE

1. TITLE OF NEWSPAPER <u>Grant County Review</u>		2. DATE <u>9-28-05</u>
3. FREQUENCY OF ISSUE <u>weekly</u>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <u>52</u>	3B. ANNUAL SUBSCRIPTION PRICE \$ <u>33.50 -- 38.00</u> includes sales tax
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <u>P.O. Box 390 Milbank, SD 57252-0390</u>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <u>P.O. Box 390 Milbank, SD 57252-0390</u>		
6. FULL NAME OF PUBLISHER: <u>Phyllis C. Justice</u>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">FULL NAME <u>Phyllis C. Justice</u></div> <div style="width: 45%;">COMPLETE MAILING ADDRESS <u>P.O. Box 390 Milbank, SD 57252-0390</u></div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. <u>none</u>		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	4100	4100
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	640	652
2. Mail Subscription (Paid and or requested)	3339	3326
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	3979	3978
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	33 5	33 5
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	33	33
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	4027	4026
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	73	74
2. Return from News Agents	5	7
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	4100	4100

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
 I swear that the statements made by me are true, correct, and complete:

Phyllis C. Justice
 (Signature)

Business Manager
 (Title)

State of South Dakota)
 County of Grant)

(Seal)

Sworn to before me this 3rd day of Oct, 2005
Debra L. Hammer
 Notary Public

My commission expires: 10-27-09